



MINNESOTA BOARD OF MEDICAL PRACTICE

University Park Plaza • 2829 University Avenue SE Suite 500 • Minneapolis, MN 55414-3246

Telephone (612) 617-2130 • Fax (612) 617-2166 • www.bmp.state.mn.us

MN Relay Service for Hearing Impaired (800) 627-3529

RE: Filing a complaint

Dear Sir/Madam:

Enclosed are the forms you will need to file your complaint. The Board is required by law to make inquiries into all complaints it receives. Your signed and dated complaint must be in writing and must be notarized. Please state in detail, on the Complaint Registration form, all facts which relate to the complaint. You should include any relevant names, dates, times, places and lists of documents or records which you have or know about which bear on this matter. The sources of the complaints and all data collected during inquiries are confidential and cannot be disclosed to anyone except other state boards and state agencies.

In order to thoroughly evaluate and investigate your complaint, the Board may wish to obtain a response from the physician(s) involved. Under State law, the physician's response is specifically for the use of the Board; it is not available to you, nor to anyone else. To obtain this response, we are requesting that you sign the enclosed Authorization to Inform Physician of Complaint form(s), which permits the Board to send your complaint to the physician(s) for response. You are not required to submit the signed authorization to the Board. If you choose not to permit the Board to send your complaint to the physician(s), the Board will still proceed in its investigation of your complaint. Obtaining the physician's response, however, has frequently proven to be useful to the Board in reviewing complaints. A separate authorization must be completed for each physician against whom you are complaining. Feel free to make copies of this form.

Also enclosed is a Records Waiver Authorization form to expedite the Board's access to your medical records. If the patient is someone other than you, the patient or the patient's guardian must sign to release the records. If you choose not to sign this Records Waiver Authorization, the Board may still obtain copies of your records through statutory authorization.

The information you provide will be evaluated to determine whether the matter is one which, under law, justifies the Board's initiation of disciplinary action against the physician.

Sincerely,

A handwritten signature in black ink, appearing to read "Robert A. Leach", with a stylized flourish at the end.

Robert A. Leach
Executive Director

COMPLAINT REGISTRATION

MINNESOTA BOARD OF MEDICAL PRACTICE
2829 UNIVERSITY AVENUE SE, SUITE 500
MINNEAPOLIS, MINNESOTA 55414-3246
(612) 617-2130

NOTICE OF RIGHTS UNDER THE MINNESOTA DATA PRIVACY ACT:

I understand that I am not legally required to complete or return this form. It is offered so that the Board may properly and thoroughly evaluate and investigate this complaint and, if necessary, submit this information in any legal proceeding. Recognizing the Board's need to verify and, if necessary, legally pursue this complaint, I authorize the Board, its agents, and/or agents of the Attorney General's Office representing the Board to disclose this information to those whom they reasonably believe have a need to know.

YOUR NAME, ADDRESS & TELEPHONE NUMBER

NAME:

STREET ADDRESS:

CITY:

STATE:

ZIP:

HOME PHONE:

WORK PHONE:

NAME OF HEALTH CARE PROFESSIONAL YOU ARE COMPLAINING ABOUT

NAME:

STREET ADDRESS:

CITY:

STATE:

ZIP:

HOME PHONE:

WORK PHONE:

STATEMENT OF COMPLAINT

SUBSCRIBED AND SWORN TO BEFORE ME

THIS _____ DAY OF _____ 20____

SIGNATURE OF NOTARY PUBLIC

SIGNATURE OF COMPLAINANT

MY COMMISSION EXPIRES

DATE

MEDICAL INFORMATION RELEASE

AUTHORIZATION FOR USE AND DISCLOSURE OF PROTECTED HEALTH DATA

To: Any Privacy Officer/Health Care Professional

Having been informed of my rights under the Minnesota Government Data Practices Act, I authorize you to furnish a copy of my records in your possession to, or allow those records to be inspected and/or copied by the Minnesota Board of Medical Practice, its agents, agents of the Attorney General's Office representing the Board, and any other appropriate state or federal governmental agencies as allowed by law.

I further authorize you, as a health care professional, to testify without limitation as to any and all of your findings and/or treatment referred to in said records and authorize the Board to use the information you provide along with the records in any legal proceeding which may arise out of this matter.

I release you, the Minnesota Board of Medical Practice, its agents and the agents of the Attorney General's Office representing the Board from Liability for so releasing said records or so testifying, and waive any privileges afforded me by the law relating to disclosure or introduction into evidence of this health information.

I understand subsequent release of this information may result in the information no longer being protected by the HIPAA Privacy Rule (45 Code of Federal Rules 164).

A photocopy of this form is as valid as the original. This authorization expires at the end of one year from the date of consent, unless expressly revoked in writing earlier. Revocation does not limit the Board's use of the information obtained prior to the date of revocation.

Print or Type Patient's Full Name

Signature of Patient or Patient's legal representative

Address

Date

Patient's Date of Birth



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AUTHORIZATION TO INFORM HEALTH CARE PROFESSIONAL OF COMPLAINT

Having been informed of my rights under the Data Practices Act, I, _____,
hereby authorize the Board of Medical Practice, its agents, or the agents of the Office of the Attorney
General, to inform _____ of my complaint by providing this
health care professional copies of my complaint documents.

Signature of Complainant

Date

Problems with a Physician?

THE MINNESOTA BOARD OF MEDICAL PRACTICE

*-The Board's role in protecting the public
-How to get help from the Board.*

University Park Plaza
2829 University Ave. SE Suite 500
Minneapolis, Minnesota 55414-3246
(612) 617-2130

Toll Free (MN Only): 1-800-657-3709

MN Relay Service for Hearing Impaired: 1-800-627-3529

Questions and Answers About the Board of Medical Practice's Complaint Review Process

Q. What can I do if I am concerned about the way a physician practices medicine?

A. If you are concerned about the way a physician practices medicine, you may wish to take one or more of the following steps:

- 1) Talk with the physician about your concerns, for in most cases she/he will want to know that you are dissatisfied with the medical services received.
- 2) Talk with the Chief of Staff or Clinic Manager about your situation, for they, too, want satisfied patients who will recommend their clinic services.
- 3) If you are unable to receive satisfaction from the above efforts or if you feel it is inappropriate to do (1) and/or (2) above, call the Minnesota Board of Medical Practice at 612-617-2130 to discuss your concerns. If the Board is able to be of assistance, you will receive complaint forms. To initiate a formal review, complete the forms, have your signature notarized, and return the packet to the Board.

Q. What kinds of things can I complain about?

A. Most complaints about physicians fall into these categories:

1. Competency matters of all kinds
2. Impairment or chemical abuse
3. Sexual misconduct
4. Inappropriate prescribing

Q. What are the things that the Board can't help me with?

A. The Board can only take action against a physician's license. It can't help you recover money from a doctor. The Board can only take action against an M.D. (Medical Doctor), a D.O. (Doctor of Osteopathy), a Physician Assistant, a Respiratory Care Practitioner, Athletic Trainer, Traditional Midwife or an Acupuncturist. It can't help you with problems regarding any other health care professional such as a psychologist, a dentist, or a podiatrist. The Board can't help you with any billing or collection problems.

Q. Must I use the Board's form to file a complaint?

A. Yes. The Board's complaint review process actually begins when the Board receives your completed, notarized complaint. By completing a form and having it notarized, you are providing the documentation the Board's staff needs to begin its review.

Q. How does the Board review a complaint?

A. First, the Board's staff gathers information from a variety of sources, starting with the information you include in your complaint. The staff will gather medical records, collect data and may interview those involved. You will be asked to sign a release of information form to allow the Board to obtain your medical records. Signing this release will speed the handling of your complaint. If it is appropriate, the staff will also obtain a response from the physician involved. When the information gathering is completed, the Board's Complaint Review Committee will review the facts and decide whether to take action against the physician involved.

Q. What is the purpose of the Board's review?

A. By reviewing the information collected, the Board is able to learn whether the physician involved has violated Minnesota's Medical Practice Act. If the review shows that the physician has violated the law, the Board may take action.

Q. What kinds of action can the Board take?

A. The Board can take a variety of actions: It can limit, suspend or revoke a physician's license to practice medicine in Minnesota. It can order a physician to pay civil penalties and to pay all court and investigative costs incurred during the complaint review process. It can order physicians to take more training, to stop treating some illnesses or to stop performing certain procedures. It can order physicians to enroll in appropriate treatment programs. It can issue a written reprimand.

Q. Will a physician know that I filed a complaint?

A. During the review process, the board will protect your identity, unless you consent to have it disclosed. Disclosing your identity can, however, assist the board in investigating your complaint, since physicians must respond to specific complaints rather than to general accusations. The Medical Practice Act provides immunity from civil lawsuits or criminal prosecution to people who file a complaint.

Q. How long does the complaint review process take?

A. There is no set time limit. The length of the review process tends to vary with the complexity of the complaint. Some reviews move very quickly, others take months, some have taken years.

Q. How can I find out about the status of my complaint?

A. You can contact the Board staff at any time. In addition, the Board staff will contact you when the review process is complete and the Board has made a decision about your complaint.

Q. Do all complaints lead to action against physicians?

A. The Board receives some complaints that do not lead to action against physicians. The Board cannot take action against a physician unless there is sufficient evidence to show that the physician violated Minnesota's Medical Practice Act. The Board must thoroughly review each complaint before it takes any action.

Q. If the Board cannot act, is there anything I can do?

A. The Board's staff may advise you on the services of other governmental agencies or professional associations if the Board is not the appropriate agency to deal with your concerns.

Q. Are there any costs associated with filing a complaint?

A. There are no costs for filing a complaint. You may have to pay a notary public to notarize your complaint before you file it. Notary fees are usually less than \$5.

Q. Do I need an attorney to help me file my complaint?

A. The Board's complaint process is designed for the public. If you have questions about filing your complaint, the Board's staff can assist you.

Q. If I file a complaint, can I also take legal action?

A. Filing a complaint will not preclude other legal action you choose to consider.

Q. Who is on the Board of Medical Practice?

A. The Board of Medical Practice has sixteen members including eleven physicians and five members of the general public, all appointed by the Governor. The Board is supported by a professional staff. The staff and the Board work closely with attorneys from the Minnesota Attorney General's Office when reviewing complaints against physicians. Physicians under investigation are required, by law, to cooperate with the Board and its staff.

For Your Information

The Minnesota Board of Medical Practice is a state regulatory agency which licenses physicians and ensures that Minnesota physicians meet minimum standards of practice.

The Minnesota Medical Practice Act is an administrative law which gives the Board of Medical Practice the authority to correct, limit, suspend, or revoke a physician's privilege to practice medicine in Minnesota if the physician does not meet Minnesota's minimum standards for medical practice. The Board's responsibility is to protect you, the patient.